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UTILITY PATENT APPLICATION TRANSMITTAL Thew nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	00169.002716.
First Na	med Inventor or Application Identifier
AXEL BECKER	
Express Mail Label No.	

(Only for new horiprovisional applications under 37 CFR 1.33(D))		Express Mail	Label No.				
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.		ADDR	ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450				
1. Fee Transmi (Submit an ori	smittal Form original, and a duplicate for fee processing)			7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)			
2. Applicant cla See 37 CFR	nims small entity status. 1.27.		8.		and/or Amino Acid e, all necessary)	Sequence Subn	nission
3. X Specification	Total Pa	ages 80		a C	Computer Readable	Form (CRF)	862
4. X Drawing(s) (35 USC 113) Total Sharation Total Pa			i	ation Sequence Lis CD-ROM or CD-R paper	_	10/673
	ewly executed (original or				Statements verifyin	g identity of abov	
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	ppy from a prior application or continuation/divisional with		9.	Assignment I	Papers (cover sheet	& document(s))	
i.	i. <u>DELETION OF INVENTOR(S)</u>			37 CFR 3.73(b) Statement (when there is an assignee)			
Signed Statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).			11.	English Translation Document (if applicable)			
6. X Application I	Data Sheet. See 37 CFR	1.76	12.	Information Statement (Disclosure (IDS)/PTO-1449	Copie Citatio	s of IDS ons
			13. X	Preliminary	Amendment		
			14. X		eipt Postcard (MPI specifically itemize		
			15.		ppy of Priority Docu riority is claimed)	ıment(s)	
			16.	Other:			
47 If a CONTINUUNC	ADDITION shock on	proprieto boy and au	anhi tha raquiaita	information.			
17. II a CONTINUING	APPLICATION, check ap						
Continuation Prior application information		Continuatio	n-in-part (CIP) 	of prior app Group/Art Un	lication No / nit:		
considered a part of the d	DIVISIONAL APPS only: This closure of the accompanying	g continuation or division	onal application and				
relied upon when a portio	n has been inadvertently omit			ESS			
Tal. Correspondence Address O5514 X Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) or Corréspondence address below					below		
NAME							
Address							
City		State			Zip Code		
Country		Telephone			Fax		

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CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCULATIONS
	TOTAL CLAIMS (37 CFR 1.16(c))	59-20 =	39	X \$ 18.00 =	\$702.00
	INDEPENDENT CLAIMS (37 CFR 1.16(b))	4-3 =	1	X \$ 84.00 =	\$84.00
	MULTIPLE DEPENDEN	T CLAIMS (if applicable) (37	CFR 1.16(d))	\$280.00 =	\$280.00
	BASIC FEE (37 CFR 1.16(a))				
<u> </u>			Total of	above Calculations =	\$1,816.00
	Reduction by 50% for filing by small entity (Note 37 CFR 1.9, 1.27, 1.28).				
		\$1,816.00			
19. Sn a.		ntity statement is enclose			
a. b. c. 20.	A small er A small er and desire Is no long X A check in the amo A check in the amo ce Commissioner is hereby 0.06-1205:	ntity statement was filed in ed. er claimed. bunt of \$ <u>1,816.00</u> to count of \$to c	n the prior nonprovisional ver the filing fee is encloover the recordal fee is	osed. enclosed.	

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED		
NAME	Scott D. Malpede - Registration No. 32,533	
SIGNATURE	att D. Malas	
DATE	September 30, 2003	

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